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SECTION I
MANAGEMENT COMMITMENT AND INVOLVEMENT

Workplace Safety Policy Statement

The management of TLC Engineering for Architecture, Inc. (TLC) is committed to providing employees with a safe and healthful work environment. It is the policy of the TLC Board of Directors that employees report unsafe conditions and do not perform work tasks if the work is considered unsafe. Employees must report all accidents, injuries, and unsafe conditions to their supervisors. No such report will result in retaliation, penalty, or other disincentive.

Employee recommendations to improve safety and health conditions will be given thorough consideration by our management team. Management will give top priority and provide the financial resources to correct unsafe conditions. Similarly, management will take disciplinary action against an employee who willfully or repeatedly violates workplace safety rules. This action may include verbal or written reprimands and may ultimately result in termination of employment.

The primary responsibility for the coordination, implementation, and maintenance of the TLC Workplace Safety Program has been assigned to:

Brenda Euler, HR Specialist, at 407-487-1023

The Chief Executive Officer, the Corporate/Directors and the Human Resources Manager will demonstrate senior management's commitment to this policy through:

1. The establishment of safety committees and providing for safety committee member participation.

2. The coordination and provision of safety education and training programs recommended by the safety committee and approved by management.

3. The recommendation of safety rules, policies, and procedures to the Executive Committee and the Board of Directors as necessary for implementation of the Workplace Safety Program; including the funding of safety issues, correcting unsafe conditions, and disciplinary procedures for violations of safety rules.
SECTION II

SAFETY COMMITTEE

Safety Committee Organization

A safety committee has been established to recommend improvements to our workplace safety program and to identify corrective measures needed to eliminate or control recognized safety and health hazards. The safety committee consists of the following supervisory and non-supervisory members of our organization:

- Brenda Euler, Safety Program Coordinator
- Aimee Weiner, Supervisory Employee Member
- Christine Brown, Non-Supervisory Employee Member
- Michael DeSue, Non-Supervisory Employee Member
- Janis Fudge, Non-Supervisory Employee Member
- Daria Gage, Non-Supervisory Employee Member
- Rita Kirkland, Non-Supervisory Employee Member
- Teresita Lopez, Non-Supervisory Employee Member
- Charlotte Marienthal, Non-Supervisory Employee Member
- Monique Mattila, Non-Supervisory Employee Member
- Sherri Muske, Non-Supervisory Employee Member
- Holly Nichols, Non-Supervisory Employee Member
- Tobby Prock, Non-Supervisory Employee Member
- Mary Reis, Non-Supervisory Employee Member
- Mike Rhea, Non-Supervisory Employee Member
- Kathy Seidl, Non-Supervisory Employee Member
- Sheryl Swartzle, Non-Supervisory Employee Member
- Heather Tank, Non-Supervisory Employee Member

Responsibilities

The safety committee shall determine the schedule for evaluating the effectiveness of control measures used to protect employees from safety and health hazards in the workplace.

The safety committee will be responsible for assisting management in reviewing and updating workplace safety rules based on accident investigation findings, any inspection findings, and employee reports of unsafe conditions or work practices; and accepting and addressing anonymous complaints and suggestions from employees.
The safety committee will be responsible for assisting management in updating the workplace safety program by evaluating employee injury and accident records, identifying trends and patterns, and formulating corrective measures to prevent recurrence.

The safety committee will be responsible for assisting management in evaluating employee accident and illness prevention programs, and promoting safety and health awareness and coworker participation through continuous improvements to the workplace safety program.

Safety committee members will participate in safety training and be responsible for assisting management in monitoring workplace safety education and training to ensure that it is in place, that it is effective, and that it is documented.

**Meetings**

Safety committee meetings are held quarterly and more often if needed. The safety program coordinator will post the minutes of each meeting.
Safety Committee Minutes

Date of Committee Meeting: ____________________  Time: ____________________
Minutes Prepared by: ________________________  Location: ________________

Members in Attendance
Name                  Name                  Name
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Report on Action Items:
________________________________________________________________________
________________________________________________________________________

Review of Accidents since Previous Meeting:
________________________________________________________________________
________________________________________________________________________

Recommendations for Accident Prevention:
________________________________________________________________________
________________________________________________________________________

Suggestions from Employees:
________________________________________________________________________
________________________________________________________________________

Recommendations for Safety Training:
________________________________________________________________________
________________________________________________________________________
SECTION III

SAFETY AND HEALTH TRAINING

Safety and Health Orientation

Workplace safety and health orientation begins on the first day of initial employment or job transfer. Each employee has access to a copy of this safety manual through the computer network, for review and future reference, and will be given a personal copy of the safety rules, policies, and procedures pertaining to his or her job. Supervisors will ask questions of employees and answer employees’ questions to ensure knowledge and understanding of safety rules, policies, and job-specific procedures described in our workplace safety program manual.

All employees will be instructed by their supervisors that compliance with the safety rules described in the workplace safety manual is required.

Job-Specific Training

- Supervisors will initially train employees on how to perform assigned job tasks safely.
- Supervisors will carefully review with each employee the specific safety rules, policies and procedures that are applicable and that are described in the workplace safety manual.
- Supervisors will give employees verbal instructions and specific directions on how to do the work safely.
- Supervisors will observe employees performing the work. If necessary, the supervisor will provide a demonstration using safe work practices, or remedial instruction to correct training deficiencies before an employee is permitted to do the work without supervision.
- All employees will receive safe operating instructions on seldom-used or new equipment before using the equipment.
- Supervisors will review safe work practices with employees before permitting the performance of new, non-routine or specialized procedures.

Periodic Retraining of Employees

All employees will be retrained periodically on safety rules, policies and procedures, and when changes are made to the workplace safety manual.
SECTION IV
FIRST-AID PROCEDURES

In all cases requiring emergency medical treatment, immediately call or have a co-worker call, to request emergency medical assistance.

Wounds

Minor: Cuts, lacerations, abrasions or punctures.
- Wash the wound using soap and water; rinse it well.
- Cover the wound using clean dressing.

Major: Large, deep and bleeding.
- Stop the bleeding by pressing directly on the wound, using a bandage or cloth.
- Keep pressure on the wound until medical help arrives.

Broken Bones

- Do not move the victim unless it is absolutely necessary.
- If the victim must be moved, “splint” the injured area. Use a board, cardboard, or rolled newspaper as a splint.

Burns

Thermal (Heat)
- Rinse the burned area without scrubbing it, and immerse it in cold water; do not use ice water.
- Blot dry the area and cover it using sterile gauze or a clean cloth.

Chemical
- Flush the exposed area with cool water immediately for 15 to 20 minutes.

Eye Injury

Small particles.
- Don’t rub your eyes.
- Use the corner of a soft, clean cloth to draw particles out or hold the eyelids open and flush the eyes continuously with water.

Large or stuck particles.
- If a particle is stuck in the eye, do not attempt to remove it.
- Cover both eyes with bandage.

Chemical
- Immediately irrigate the eyes and under the eyelids with water, for 30 minutes.

Neck and Spine Injury

- If the victim appears to have injured his or her neck or spine, or is unable to move his or her arm or leg, do not attempt to move the victim unless it is absolutely necessary,

Heat Exhaustion

- Loosen the victim’s tight clothing.
- Give the victim “sips” of cool water.
- Make the victim lie down in a cooler place with the feet raised.
COCOA/BREVARD COUNTY
FIRST-AID PROCEDURES

Emergency Phone Numbers
Safety Coordinator: Brenda Euler
First Aid: Danielle Eberhardt
Ambulance: 911
Medical Clinic: Rockledge Urgent Care Cntr.
Phone: (321) 639-1601
Clinic Address: 1682 S. Fiske Blvd.
Rockledge, FL 32955

Poison Control: (800) 288-9999
Fire Department: 911
Police: 911
Hospital: Wuesthoff Memorial Hospital
Phone: (321) 636-2211
Phone: (321) 636-2211
Hospital Address: 110 Longwood Avenue
Rockledge, FL 32955

Emergencies Only: Nearest Hospital

Minor First-Aid Treatment
First-aid kits are kept in the front office and in the service vehicles. If you sustain an injury or are involved in an accident requiring minor first-aid treatment:
- Inform your supervisor.
- Administer first-aid treatment to the injury or wound.
- If a first-aid kit is used, indicate usage on the accident investigation report.
- Access to a first-aid kit is not intended to be a substitute for medical attention.
- Provide details for the completion of the accident investigation report.

Non-Emergency Medical Treatment
For non-emergency, work-related injuries requiring professional medical assistance, management must first authorize treatment. If you sustain an injury requiring treatment other than first aid:
- Inform your supervisor.
- Proceed to the posted medical facility. Your supervisor will assist with transportation, if necessary.
- Provide details for the completion of the accident investigation report.

Emergency Medical Treatment
If you sustain a severe injury requiring emergency treatment:
- Call for help and seek assistance from a co-worker.
- Use the emergency telephone numbers and instructions posted on the first-aid kit to request assistance and transportation to the local hospital emergency room.
- Provide details for the completion of the accident investigation report.

First-Aid Training
Each employee will receive training and instruction from his or her supervisor on our first-aid procedures.
DALLAS/DALLAS COUNTY
FIRST-AID PROCEDURES

Emergency Phone Numbers
Safety Coordinator: Brenda Euler  Poison Control: (800) 222-1222
First Aid: Fire Department: 911
Ambulance: 911 Police: 911
Medical Clinic: Highland Park Emergency Center
Phone: 214-443-8131 Phone: 214-590-8000
Clinic Address: Suite 108 Hospital Address: 5201 Harry Hines Blvd.
5150 Lemmon Avenue Dallas, TX 75209
Dallas, TX 75235
Emergencies Only: Nearest Hospital

Minor First-Aid Treatment
First-aid kits are kept in the kitchen above the sink. If you sustain an injury or are involved in an accident requiring minor first-aid treatment:
• Inform your supervisor.
• Administer first-aid treatment to the injury or wound.
• If a first-aid kit is used, indicate usage on the accident investigation report.
• Access to a first-aid kit is not intended to be a substitute for medical attention.
• Provide details for the completion of the accident investigation report.

Non-Emergency Medical Treatment
For non-emergency, work-related injuries requiring professional medical assistance, management must first authorize treatment. If you sustain an injury requiring treatment other than first aid:
• Inform your supervisor.
• Proceed to the posted medical facility. Your supervisor will assist with transportation, if necessary.
• Provide details for the completion of the accident investigation report.

Emergency Medical Treatment
If you sustain a severe injury requiring emergency treatment:
• Call for help and seek assistance from a co-worker.
• Use the emergency telephone numbers and instructions posted on the first-aid kit to request assistance and transportation to the local hospital emergency room.
• Provide details for the completion of the accident investigation report.

First-Aid Training
Each employee will receive training and instruction from his or her supervisor on our first-aid procedures.
DEERFIELD BEACH/BROWARD COUNTY
FIRST-AID PROCEDURES

Emergency Phone Numbers
Safety Coordinator: Brenda Euler       Poison Control: (800) 288-9999
First Aid:                           Fire Department: 911
Ambulance: 911                      Police: 911
Medical Clinic: Minor Emergi-Care    Hospital: Boca Raton Community Hospital
Phone: (954) 421-8181               Phone: (561) 395-7100
Clinic Address: 750 S. Federal Highway	Hospital Address: 800 Meadows Road
   Deerfield Beach, FL 33441               Boca Raton, FL 33486
Emergencies Only: Nearest Hospital

Minor First-Aid Treatment
First-aid kits are kept in the kitchen under the toaster oven. If you sustain an injury or are involved in an
accident requiring minor first-aid treatment:

- Inform your supervisor.
- Administer first-aid treatment to the injury or wound.
- If a first-aid kit is used, indicate usage on the accident investigation report.
- Access to a first-aid kit is not intended to be a substitute for medical attention.
- Provide details for the completion of the accident investigation report.

Non-Emergency Medical Treatment
For non-emergency, work-related injuries requiring professional medical assistance, management must
first authorize treatment. If you sustain an injury requiring treatment other than first aid:

- Inform your supervisor.
- Proceed to the posted medical facility. Your supervisor will assist with transportation, if necessary.
- Provide details for the completion of the accident investigation report.

Emergency Medical Treatment
If you sustain a severe injury requiring emergency treatment:

- Call for help and seek assistance from a co-worker.
- Use the emergency telephone numbers and instructions posted on the first-aid kit to request
  assistance and transportation to the local hospital emergency room.
- Provide details for the completion of the accident investigation report.

First-Aid Training
Each employee will receive training and instruction from his or her supervisor on our first-aid procedures.
Emergency Phone Numbers

Safety Coordinator: Brenda Euler

Poison Control: (800) 288-9999

First Aid:

Fire Department: 911

Ambulance: 911

Police: 911

Medical Clinic: Health Park Medical Center

Hospital: Gulf Coast Hospital

Phone: (239) 433-7799

Hospital Address: 13681 Doctors Way

Clinic Address: 9981 Healthpark Circle

Ft. Myers, FL 33908

Ft. Myers, FL 33912

Emergencies Only: Nearest Hospital

Minor First-Aid Treatment

First-aid kits are kept in the front office and in the service vehicles. If you sustain an injury or are involved in an accident requiring minor first-aid treatment:

- Inform your supervisor.
- Administer first-aid treatment to the injury or wound.
- If a first-aid kit is used, indicate usage on the accident investigation report.
- Access to a first-aid kit is not intended to be a substitute for medical attention.
- Provide details for the completion of the accident investigation report.

Non-Emergency Medical Treatment

For non-emergency, work-related injuries requiring professional medical assistance, management must first authorize treatment. If you sustain an injury requiring treatment other than first aid:

- Inform your supervisor.
- Proceed to the posted medical facility. Your supervisor will assist with transportation, if necessary.
- Provide details for the completion of the accident investigation report.

Emergency Medical Treatment

If you sustain a severe injury requiring emergency treatment:

- Call for help and seek assistance from a co-worker.
- Use the emergency telephone numbers and instructions posted on the first-aid kit to request assistance and transportation to the local hospital emergency room.
- Provide details for the completion of the accident investigation report.

First-Aid Training

Each employee will receive training and instruction from his or her supervisor on our first-aid procedures.
JACKSONVILLE/DUVAL COUNTY
FIRST-AID PROCEDURES

Emergency Phone Numbers
Safety Coordinator: Brenda Euler
First Aid: Fire Department: 911
Ambulance: 911
Medical Clinic: CareSpot
Phone: (904) 854-1730
Clinic Address: 4498 Hendricks Avenue
Phone: (904) 202-2000
Clinic Address: 4498 Hendricks Avenue
Jacksonville, FL 32207

Hospital: Baptist Medical Center
Phone: (904) 202-2000
Hospital Address: 800 Prudential Drive
Jacksonville, FL 32207

Emergencies Only: Nearest Hospital

Minor First-Aid Treatment
First-aid kits are kept in the front office and in the service vehicles. If you sustain an injury or are involved in an accident requiring minor first-aid treatment:

- Inform your supervisor.
- Administer first-aid treatment to the injury or wound.
- If a first-aid kit is used, indicate usage on the accident investigation report.
- Access to a first-aid kit is not intended to be a substitute for medical attention.
- Provide details for the completion of the accident investigation report.

Non-Emergency Medical Treatment
For non-emergency, work-related injuries requiring professional medical assistance, management must first authorize treatment. If you sustain an injury requiring treatment other than first aid:

- Inform your supervisor.
- Proceed to the posted medical facility. Your supervisor will assist with transportation, if necessary.
- Provide details for the completion of the accident investigation report.

Emergency Medical Treatment
If you sustain a severe injury requiring emergency treatment:

- Call for help and seek assistance from a co-worker.
- Use the emergency telephone numbers and instructions posted on the first-aid kit to request assistance and transportation to the local hospital emergency room.
- Provide details for the completion of the accident investigation report.

First-Aid Training
Each employee will receive training and instruction from his or her supervisor on our first-aid procedures.
MIAMI/MIAMI DADE COUNTY
FIRST-AID PROCEDURES

Emergency Phone Numbers
Safety Coordinator: Brenda Euler
First Aid: Edwin Fargo, Katherine Roth
Ambulance: 911
Medical Clinic: Occupational Medical Center
Phone: (305) 635-1445
Clinic Address: 3270 Northwest 36th Street
Miami, FL 33142
Poison Control: (800) 288-9999
Fire Department: 911
Police: 911
Hospital: Coral Gables Hospital
Phone: (305) 445-8461
Hospital Address: 3100 Douglas Road
Coral Gables, FL 33134

Emergencies Only: Nearest Hospital

Minor First-Aid Treatment
First-aid kits are kept in the front office and in the service vehicles. If you sustain an injury or are involved in an accident requiring minor first-aid treatment:
- Inform your supervisor.
- Administer first-aid treatment to the injury or wound.
- If a first-aid kit is used, indicate usage on the accident investigation report.
- Access to a first-aid kit is not intended to be a substitute for medical attention.
- Provide details for the completion of the accident investigation report.

Non-Emergency Medical Treatment
For non-emergency, work-related injuries requiring professional medical assistance, management must first authorize treatment. If you sustain an injury requiring treatment other than first aid:
- Inform your supervisor.
- Proceed to the posted medical facility. Your supervisor will assist with transportation, if necessary.
- Provide details for the completion of the accident investigation report.

Emergency Medical Treatment
If you sustain a severe injury requiring emergency treatment:
- Call for help and seek assistance from a co-worker.
- Use the emergency telephone numbers and instructions posted on the first-aid kit to request assistance and transportation to the local hospital emergency room.
- Provide details for the completion of the accident investigation report.

First-Aid Training
Each employee will receive training and instruction from his or her supervisor on our first-aid procedures.
NASHVILLE/ WILLIAMSON COUNTY
FIRST-AID PROCEDURES

Emergency Phone Numbers
Safety Coordinator: Brenda Euler
First Aid: Poison Control:  (800) 288-9999
Ambulance: 911 Fire Department: 911
Medical Clinic: Police: 911
Phone: Hospital: Williamson Medical Center
Clinic Address: Phone: (615) 791-0500
Hospital Address: 4321 Carothers Parkway
Franklin, TN  37067
Emergencies Only: Nearest Hospital

Minor First-Aid Treatment
First-aid kits are kept in the front office and in the service vehicles. If you sustain an injury or are involved in an accident requiring minor first-aid treatment:
- Inform your supervisor.
- Administer first-aid treatment to the injury or wound.
- If a first-aid kit is used, indicate usage on the accident investigation report.
- Access to a first-aid kit is not intended to be a substitute for medical attention.
- Provide details for the completion of the accident investigation report.

Non-Emergency Medical Treatment
For non-emergency, work-related injuries requiring professional medical assistance, management must first authorize treatment. If you sustain an injury requiring treatment other than first aid:
- Inform your supervisor.
- Proceed to the posted medical facility. Your supervisor will assist with transportation, if necessary.
- Provide details for the completion of the accident investigation report.

Emergency Medical Treatment
If you sustain a severe injury requiring emergency treatment:
- Call for help and seek assistance from a co-worker.
- Use the emergency telephone numbers and instructions posted on the first-aid kit to request assistance and transportation to the local hospital emergency room.
- Provide details for the completion of the accident investigation report.

First-Aid Training
Each employee will receive training and instruction from his or her supervisor on our first-aid procedures.
NEW ORLEANS/ORLEANS PARISH
FIRST-AID PROCEDURES

Emergency Phone Numbers
Safety Coordinator: Brenda Euler
Poison Control: (800) 288-9999
First Aid: Fire Department: 911
Ambulance: Police: 911
Medical Clinic: Hospital:

Phone: Phone:
Clinic Address: Hospital Address:

Emergencies Only: Nearest Hospital

Minor First-Aid Treatment
First-aid kits are kept in the front office and in the service vehicles. If you sustain an injury or are involved in an accident requiring minor first-aid treatment:
• Inform your supervisor.
• Administer first-aid treatment to the injury or wound.
• If a first-aid kit is used, indicate usage on the accident investigation report.
• Access to a first-aid kit is not intended to be a substitute for medical attention.
• Provide details for the completion of the accident investigation report.

Non-Emergency Medical Treatment
For non-emergency, work-related injuries requiring professional medical assistance, management must first authorize treatment. If you sustain an injury requiring treatment other than first aid:
• Inform your supervisor.
• Proceed to the posted medical facility. Your supervisor will assist with transportation, if necessary.
• Provide details for the completion of the accident investigation report.

Emergency Medical Treatment
If you sustain a severe injury requiring emergency treatment:
• Call for help and seek assistance from a co-worker.
• Use the emergency telephone numbers and instructions posted on the first-aid kit to request assistance and transportation to the local hospital emergency room.
• Provide details for the completion of the accident investigation report.

First-Aid Training
Each employee will receive training and instruction from his or her supervisor on our first-aid procedures.
ORLANDO/ORANGE COUNTY
FIRST-AID PROCEDURES

Emergency Phone Numbers

Safety Coordinator: Brenda Euler  Poison Control: (800) 288-9999
First Aid: Glen Climer, Edwin Fajardo, Kristy  Fire Department: 911
Walson
Ambulance: 911  Police: 911
Medical Clinic: Pine Castle Walk In Clinic  Hospital: FL Hospital Medical Center
Phone: (407) 850-0056  Phone: (407) 896-6611
Clinic Address:  5636 Hansell Avenue  Hospital Address: 601 E. Rollins Street
Orlando, FL 32809  Orlando, FL 32803
Emergencies Only: Nearest Hospital

Minor First-Aid Treatment
First-aid kits are kept in the front office and in the service vehicles. If you sustain an injury or are involved in an accident requiring minor first-aid treatment:
- Inform your supervisor.
- Administer first-aid treatment to the injury or wound.
- If a first-aid kit is used, indicate usage on the accident investigation report.
- Access to a first-aid kit is not intended to be a substitute for medical attention.
- Provide details for the completion of the accident investigation report.

Non-Emergency Medical Treatment
For non-emergency, work-related injuries requiring professional medical assistance, management must first authorize treatment. If you sustain an injury requiring treatment other than first aid:
- Inform your supervisor.
- Proceed to the posted medical facility. Your supervisor will assist with transportation, if necessary.
- Provide details for the completion of the accident investigation report.

Emergency Medical Treatment
If you sustain a severe injury requiring emergency treatment:
- Call for help and seek assistance from a co-worker.
- Use the emergency telephone numbers and instructions posted on the first-aid kit to request assistance and transportation to the local hospital emergency room.
- Provide details for the completion of the accident investigation report.

First-Aid Training
Each employee will receive training and instruction from his or her supervisor on our first-aid procedures.
TAMPA/HILLSBOROUGH COUNTY
FIRST-AID PROCEDURES

Emergency Phone Numbers
Safety Coordinator: Brenda Euler
First Aid: David Fusco, Monique Mattila
Ambulance: 911
Medical Clinic: Healthpoint Medical Group
Phone: 813-636-2000
Clinic Address: 406 N. Reo Street #200
Tampa, FL 33609

Poison Control: (800) 288-9999
Fire Department: 911
Police: 911
Hospital: St. Joseph’s Hospital
Phone: (813) 870-4000
Hospital Address: 3001 W. Martin Luther King
Tampa, FL 33607
Emergencies Only: Nearest Hospital

Minor First-Aid Treatment
First-aid kits are kept in the front office and in the service vehicles. If you sustain an injury or are involved in an accident requiring minor first-aid treatment:
- Inform your supervisor.
- Administer first-aid treatment to the injury or wound.
- If a first-aid kit is used, indicate usage on the accident investigation report.
- Access to a first-aid kit is not intended to be a substitute for medical attention.
- Provide details for the completion of the accident investigation report.

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For non-emergency, work-related injuries requiring professional medical assistance, management must first authorize treatment. If you sustain an injury requiring treatment other than first aid:
- Inform your supervisor.
- Proceed to the posted medical facility. Your supervisor will assist with transportation, if necessary.
- Provide details for the completion of the accident investigation report.

Emergency Medical Treatment
If you sustain a severe injury requiring emergency treatment:
- Call for help and seek assistance from a co-worker.
- Use the emergency telephone numbers and instructions posted on the first-aid kit to request assistance and transportation to the local hospital emergency room.
- Provide details for the completion of the accident investigation report.

First-Aid Training
Each employee will receive training and instruction from his or her supervisor on our first-aid procedures.
SAN ANTONIO/BEXAR COUNTY
FIRST-AID PROCEDURES

Emergency Phone Numbers
Safety Coordinator: Brenda Euler
First Aid: Poison Control: (800) 288-9999
Ambulance: 911 Fire Department: 911
Medical Clinic: Blanco Road Medical Clinic Hospital: Methodist Hospital
Phone: (210) 349-4406 Phone: (210) 575-4000
Clinic Address: 4603 Blanco Road Hospital Address: 7700 Floyd Curl Drive
San Antonio, TX 78212 San Antonio, TX 78229
Emergencies Only: Nearest Hospital

Minor First-Aid Treatment
First-aid kits are kept in the front office and in the service vehicles. If you sustain an injury or are involved
in an accident requiring minor first-aid treatment:
• Inform your supervisor.
• Administer first-aid treatment to the injury or wound.
• If a first-aid kit is used, indicate usage on the accident investigation report.
• Access to a first-aid kit is not intended to be a substitute for medical attention.
• Provide details for the completion of the accident investigation report.

Non-Emergency Medical Treatment
For non-emergency, work-related injuries requiring professional medical assistance, management must
first authorize treatment. If you sustain an injury requiring treatment other than first aid:
• Inform your supervisor.
• Proceed to the posted medical facility. Your supervisor will assist with transportation, if necessary.
• Provide details for the completion of the accident investigation report.

Emergency Medical Treatment
If you sustain a severe injury requiring emergency treatment:
• Call for help and seek assistance from a co-worker.
• Use the emergency telephone numbers and instructions posted on the first-aid kit to request
assistance and transportation to the local hospital emergency room.
• Provide details for the completion of the accident investigation report.

First-Aid Training
Each employee will receive training and instruction from his or her supervisor on our first-aid procedures.
SARASOTA/SARASOTA COUNTY
FIRST-AID PROCEDURES

Emergency Phone Numbers
Safety Coordinator: Brenda Euler
First Aid: 
Ambulance: 911 
Medical Clinic: Sarasota Urgent Care
Phone: (941) 907-2800
Clinic Address: 6272 Lake Osprey Drive
Sarasota, FL 34240
Poison Control: (800) 288-9999
Fire Department: 911
Police: 911
Hospital: Lakewood Ranch Medical Center
Phone: 
Hospital Address: 3001 W. Martin Luther King
Tampa, FL 33607
Emergencies Only: Nearest Hospital

Minor First-Aid Treatment
First-aid kits are kept in the front office and in the service vehicles. If you sustain an injury or are involved in an accident requiring minor first-aid treatment:
- Inform your supervisor.
- Administer first-aid treatment to the injury or wound.
- If a first-aid kit is used, indicate usage on the accident investigation report.
- Access to a first-aid kit is not intended to be a substitute for medical attention.
- Provide details for the completion of the accident investigation report.

Non-Emergency Medical Treatment
For non-emergency, work-related injuries requiring professional medical assistance, management must first authorize treatment. If you sustain an injury requiring treatment other than first aid:
- Inform your supervisor.
- Proceed to the posted medical facility. Your supervisor will assist with transportation, if necessary.
- Provide details for the completion of the accident investigation report.

Emergency Medical Treatment
If you sustain a severe injury requiring emergency treatment:
- Call for help and seek assistance from a co-worker.
- Use the emergency telephone numbers and instructions posted on the first-aid kit to request assistance and transportation to the local hospital emergency room.
- Provide details for the completion of the accident investigation report.

First-Aid Training
Each employee will receive training and instruction from his or her supervisor on our first-aid procedures.
SECTION V

ACCIDENT INVESTIGATION

Accident Investigation Procedures

An accident investigation will be performed by the supervisor at the location where the accident occurred. The safety coordinator is responsible for seeing that the accident investigation reports (see page V.2) are being filled out completely, and that the recommendations are being addressed. Supervisors will investigate all accidents, injuries, and occupational diseases using the following investigation procedures:

- Implement temporary control measures to prevent any further injuries to employees.
- Review the equipment, operations, and processes to gain an understanding of the accident situation.
- Identify and interview each witness and any other person who might provide clues to the accident’s causes.
- Investigate causal conditions and unsafe acts; make conclusions based on existing facts.
- Complete the accident investigation report.
- Provide recommendations for corrective actions.
- Indicate the need for additional or remedial safety training.

Please report all injuries (no matter how slight) to your supervisor immediately, as well as anything that needs repair or is a safety hazard. An Accident Investigation Report can be found on the TLC Intranet/HR Dept/ Tools and Forms and must be completed within thirty days and forwarded the report to HR. When visiting a job site, please be sure to wear proper shoes and a hard hat in all designated areas.
Accident Investigation Report

Report #: ___________________

Company: _______________________________________________________________________________________

Address: __________________________________________________________________________________________

1. Name of injured: ______________________________ S.S. #: _______________________________

2. Sex M [ ] F [ ]               Age: ____________ Date of accident: ____/____/____

3. Time of accident: _______am   _______ pm     Day of accident: ______________

4. Employee's job title: ________________________________________________________________________________

5. Length of experience on job: ____________     Years: _____   Months: _____

6. Address of location where the accident occurred: _________________________________________________________
   __________________________________________________________________________________________________

7. Nature of injury, injury type, and part of the body affected:  __________________________________________________
   __________________________________________________________________________________________________

8. Describe the accident and how it occurred: 
   __________________________________________________________________________________________________
   __________________________________________________________________________________________________
   __________________________________________________________________________________________________

9. Cause of the accident: ______________________________________________________________________________
   __________________________________________________________________________________________________

10. Was personal protective equipment required?   Yes [ ] No [ ]
    Was it provided?   Yes [ ] No [ ]
    Was it being used? Yes [ ] No [ ] If "no," explain.
    Was it being used as trained by supervisor or designated trainer? Yes [ ] No [ ] If "no," explain.

11. Witness(es): ______________________________________________________________________________________
    __________________________________________________________________________________________________

12. Safety training provided to the injured?  Yes [ ] No [ ] If "no," explain. ________________________________
    __________________________________________________________________________________________________

13. Interim corrective actions taken to prevent recurrence. _____________________________________________________
    __________________________________________________________________________________________________

14. Permanent corrective action recommended to prevent recurrence.    __________________________________________
    __________________________________________________________________________________________________

15. Date of report _______ 19______                             Prepared by: ____________________________________________
    Supervisor (Signature)___________________________________________           Date: ____/____/_____

16. Status and follow-up action taken by safety coordinator:____________________________________________________
    __________________________________________________________________________________________________

Safety Coordinator (Signature): ________________________________ Date: ____/____/_____
Instructions for Completing the Accident Investigation Report

An accident investigation is not designed to find fault or place blame, but is an analysis of the accident to determine causes that can be controlled or eliminated.

(Item 6) Identification: This section is self-explanatory.

(Item 7) Nature of Injury:
- **Injury Type:**
  - *First aid* – injury resulted in minor injury treated on premises;
  - *Medical* – injury treated off premises by physician;
  - *Lost time* – injured missed more than one day of work;
  - *No Injury* – no injury, near-miss type of incident.

- **Part of the Body:** Part of the body directly affected, e.g., foot, arm, hand, head.

(Item 8) Describe the accident:
- Describe the accident, including exactly what happened, and where and how it happened. Describe the equipment or materials involved.

(Item 9) Cause of the accident:
- Describe all conditions or acts which contributed to the accident, i.e.,
  - *Unsafe Conditions* – spills, grease on the floor, poor housekeeping or other physical conditions.
  - *Unsafe Acts* – unsafe work practices such as failure to warn, failure to use required personal protective equipment.

(Item 10) Personal Protective Equipment: This section is self-explanatory.

(Item 11) Witnesses:
- List names, addresses, and phone numbers.

(Item 12) Safety Training Provided:
- Was any safety training provided to the injured related to the work activity being performed?

(Item 13) Interim Corrective Action:
- Measures taken by supervisor to prevent recurrence of incident, i.e., barricading accident area, posting warning signs, shutting down operations.

(Item 14) Permanent Corrective Action: This section is self-explanatory.

(Item 15) Date of Report – Prepared By This section is self-explanatory.

(Item 16) Follow-up
- Once the investigation is complete, the safety coordinator shall review and follow-up the investigation to ensure that corrective actions recommended by the safety committee and approved by the employer are taken and control measures have been implemented.
SECTION VI

RECORD KEEPING PROCEDURES

Record keeping Procedures

The safety coordinator will control and maintain all employee accident and injury records. Records are maintained for a minimum of three (3) years and include:

- Accident Investigation Reports
- Workers’ Compensation First Report of Injury or Illness LES Form DWC-1
- Log & Summary of Occupational Injuries and Illnesses LES SAF 200
SECTION VII

SAFETY RULES, POLICIES AND PROCEDURES

The safety rules contained on these pages have been prepared to protect you in your daily work. Employees are to follow these rules, review them often and use good common sense in carrying out assigned duties.

These safety rules shall include both general workplace safety rules and job-specific safety rules.

General Rules

All Employees

Job-Specific Rules

Office Personnel

If you are aware of an unsafe or hazardous condition, please notify your Supervisor immediately. If you cannot reach your Supervisor or Division Director, contact the Safety Coordinator at (407) 487-1023.

ALL EMPLOYEES

Housekeeping

1. Use caution signs/cones to barricade slippery areas.
2. Do not store or leave items on stairways.
3. Return tools to their storage places after using them.
4. Do not block or obstruct stairwells, exits or accesses to safety and emergency equipment, such as, fire extinguishers or fire alarms.
5. Do not place materials, such as, boxes or trash in walkways and passageways.
6. Do not use gasoline for cleaning purposes.
7. Mop up water around drinking fountains; drink dispensing machines and ice machines.

Hazardous Materials

Hazardous materials and chemicals are not to be used in our workplaces. If we encounter hazardous materials or chemicals in the course of our work at other locations, we will take immediate corrective action to eliminate health and safety risks to our employees.
Lifting Procedures

General
1. Test the weight of the load before lifting by pushing the load along its resting surface.
2. If the load is too heavy or bulky, use lifting and carrying aids, such as, hand trucks, dollies, pallet jacks and carts, or get assistance from a co-worker.
3. Never lift anything if your hands are greasy or wet.
4. Wear protective gloves when lifting objects with sharp corners or jagged edges.

When Lifting
1. Face the load.
2. Position your feet 6” – 12” apart with one foot slightly in front of the other.
3. Bend at the knees, not at the back.
4. Keep your back straight.
5. Get a firm grip on the object, using your hands and fingers. Use handles when they are present.
6. Hold the object as close to your body as possible.
7. Perform lifting movements smoothly and gradually; do not jerk the load.
8. If you must change direction while lifting or carrying the load, pivot your feet and turn your entire body. Do not twist at the waist.
9. Set down objects in the same manner as you picked them up, except in reverse.
10. Do not lift an object from the floor to a level above your waist in one motion. Set the load down on a table or bench and then adjust your grip before lifting it higher.

Ladders and Step Ladders
1. Read and follow the manufacturer instruction’s label affixed to the ladder if you are unsure how to use the ladder.
2. Do not use ladders that have loose rungs, cracked or split side rails, missing rubber foot pads, or are otherwise visibly damaged.
3. Keep ladder rungs clean and free of grease. Remove buildup of material, such as, dirt or mud.
4. When performing work from a ladder, face the ladder and do not lean backward or sideways from the ladder.
5. Allow only one person on the ladder at a time.
6. Do not stand on the top two rungs of any ladder.
7. Do not stand on a ladder that wobbles, or that leans to the left or right of center.
8. Do not try to “walk” a ladder by rocking it. Climb down the ladder and then move it.

Climbing a Ladder
1. Face the ladder when climbing up or down it.
2. Do not carry items in your hands while climbing up or down a ladder.
3. Maintain a three-point contact by keeping both hands and one foot or both feet and one hand on the ladder at all time when climbing up or down the ladder.

Driving/Vehicle Safety

Fueling Vehicles
1. Turn the vehicle off before fueling.
2. Do not smoke while fueling a vehicle.
3. Wash hands with soap and water if you spill gasoline on your hands.

Driving Rules
1. Shut all doors and fasten your seat belt before moving the vehicle.
2. Obey all traffic patterns and signs at all times.
3. Maintain a three-point contact using both hands and one foot or both feet and one hand when climbing into and out of vehicles.
4. Do not leave keys in an unattended vehicle.
OFFICE EMPLOYEES
Office Safety

General

1. Do not place material, such as, boxes or trash in walkways and passageways.
2. Do not throw matches, cigarettes or other smoking materials into trash baskets.
3. Do not kick objects out of your pathway; pick them up or push them out of the way.
4. Keep floors clear of items, such as, paper clips, pencils, tacks or staples.
5. Straighten or remove rugs and mats that do not lie flat on the floor.
6. Mop up water around drinking fountains and drink dispensing machines.
7. Do not block your view by carrying large or bulky items; use a dolly or hand truck or get assistance from a co-worker.
8. Store sharp objects, such as, pens, pencils, letter openers or scissors in drawers or with the points down in a container.
9. Carry pencils, scissors and other sharp objects with the tips pointing down.
10. Use the ladder or step stool to retrieve or store items that are located above your head.
11. Do not run on stairs to take more than one step at a time.
12. Keep doors in hallways fully opened or fully closed.
13. Use handrails when ascending or descending stairs or ramps.
14. Obey all posted safety and danger signs.

Furniture Use

1. Open only one file cabinet draw at a time. Close the filing cabinet drawer you are working in before opening another filing drawer in the same cabinet.
2. Use the handle when closing doors, drawers and files.
3. Put heavy files in the bottom drawers of file cabinets.
4. Do not tilt the chair you are sitting in on its back two legs.
5. Do not stand on furniture to reach high places.

Equipment Use

1. Do not use fans that have excessive vibration, frayed cords or missing guards.
2. Do not place floor-type fans in walkways, aisles or doorways.
3. Do not plug multiple electrical cords into a single outlet.
4. Do not use extension or power cords that have the ground prong removed or broken.
5. Do not use frayed, cut or cracked electrical cords.
6. Use a cord cover or tape the cord down when running electrical cords across aisles, between desks or across entrances or exits.
7. Turn the power switch of the local exhaust fans to “On” when operating the blueprint machine.
8. Do not use lighting fluid to clean drafting equipment; use soap and water.
The Workplace Safety Committee recommends the following procedures. For your safety and the safety of others, your compliance with these procedures is required when conducting site visits on behalf of TLC.

SITE VISITS FOR TLC EMPLOYEES

1. Check-in or sign-in with the General Contractor/Construction Manager. Tell them the intent of your visit so they will know that you are on site and where to locate you in the building, if necessary.

2. Wear a hard hat at all times while on the project if the project is designated as a hard hat project. If you don’t have one or one of the TLC hard hats isn’t available, request a hard hat at the General Contractor’s trailer.

3. Wear proper clothing. No loose-fitting clothing, no high-heeled shoes, and no sneakers or sandals are allowed on any site. Shoes should have hard soles, preferably thick rubber.

4. Safety glasses are required if you wear glasses with glass lens or wear contact lens. Glasses with plastic lens are suitable without safety glasses.

5. When on the site, be alert to the construction work going on around or over you. Watch where you walk; there may be boards with nails protruding, rebar ends sticking out, or a multitude of other obstacles that can trip or injure you. If you witness or observe a condition that you believe is dangerous, report it immediately to the contractor’s or client’s representative; they are responsible for job safety issues at the site.

6. Do not look directly at any welding that may be taking place.

7. Do not walk under any material that is being hoisted into place by cranes or other methods.

8. Check out with the General Contractor when leaving the site.

9. Be alert. Accidents happen during construction and we do not want TLC staff to be injured on the job.

10. We are not licensed contractors. If mechanical and electrical equipment must be opened or operated for inspection and/or testing, have the contractor perform the operation necessary. In existing facilities, the operation or shutdown of equipment must be coordinate with the owner’s representative as well.

The majority of site-visit problems TLC has experienced in the past relate to the clothing and shoes issues. We need to accept responsibility for dressing appropriately for the job assignment that day.
WORK PLACE SAFETY PROGRAM
Responsibilities Chart

Supervisor’s Responsibilities
- Orientation of new employees.
- Provide job-specific training.
- Provide periodic re-training.
- Conduct accident investigations within 24 hours following procedures provided.
- Ensure availability of First-Aid kits with emergency numbers.
- Participate in Safety Committee meetings when requested.

Employees
- Follow safety procedures as directed.
- Notify supervisor(s) of unsafe conditions.
- Follow First-Aid procedures as directed.
- Participate in Safety Committee meetings when requested.

Coordinator
- Disseminate program/safety information.
- Incorporate with TLC orientation and TLC training programs.
- Follow-up on accident investigation timely.
- Schedule Safety Committee meetings and complete minutes within one week for posting.
- Maintain records required of the Work Place Safety Program.